



# Retired Unit Exemption

For more information, see instructions and refer to 40 CFR 72.8

This submission is: ~ New ~ Revised

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**STEP 1**  
Identify the unit by plant name,  
State, ORIS Code, and unit ID#.

|            |       |           |          |
|------------|-------|-----------|----------|
| Plant Name | State | ORIS Code | Unit ID# |
|------------|-------|-----------|----------|

**STEP 2**  
Identify the date on which the  
unit was (or will be)  
permanently retired.

|       |
|-------|
| _____ |
|-------|

**STEP 3**  
Identify the first full calendar  
year in which the unit meets (or  
will meet) the requirements of  
40 CFR 72.8(d).

|                  |
|------------------|
| January 1, _____ |
|------------------|

**STEP 4**  
Read the special provisions.

## Special Provisions

(1) A unit exempt under 40 CFR 72.8 shall not emit any sulfur dioxide and nitrogen oxides starting on the date that the exemption takes effect. The owners and operators of the unit will be allocated allowances in accordance with 40 CFR part 73 subpart B. If the unit is a Phase I unit, for each calendar year in Phase I, the designated representative of the unit shall submit a Phase I permit application in accordance with 40 CFR part 72 subparts C and D and an annual certification report in accordance with 40 CFR 72.90 through 72.92 and is subject to 40 CFR 72.95 and 72.96.

(2) A unit exempt under 40 CFR 72.8 shall not resume operation unless the designated representative of the source that includes the unit submits a complete Acid Rain permit application under 40 CFR 72.31 for the unit not less than 24 months prior to the later of January 1, 2000 or the date on which the unit is first to resume operation.

(3) The owners and operators and, to the extent applicable, the designated representative of a unit exempt under 40 CFR 72.8 shall comply with the requirements of the Acid Rain Program concerning all periods for which the exemption is not in effect, even if such requirements arise, or must be complied with, after the exemption takes effect.

(4) For any period for which a unit is exempt under 40 CFR 72.8, the unit is not an affected unit under the Acid Rain Program and 40 CFR parts 70 and 71 and is not eligible to be an opt-in source under 40 CFR part 74. As an unaffected unit, the unit shall continue to be subject to any other applicable requirements under 40 CFR parts 70 and 71.

(5) For a period of 5 years from the date the records are created, the owners and operators of a unit exempt under 40 CFR 72.8 shall retain at the source that includes the unit records demonstrating that the unit is permanently retired. The 5-year period for keeping records may be extended for cause, at any time prior to the end of the period, in writing by the Administrator or the North Dakota Department of Health, Division of Air Quality. The owners and operators bear the burden of proof that the unit is permanently retired.

(6) On the earlier of the following dates, a unit exempt under paragraph 40 CFR 72.8(b) or (c) shall lose its exemption and become an affected unit under the Acid Rain Program and 40 CFR parts 70 and 71: (i) the date on which the designated representative submits an Acid Rain permit application under paragraph (2); or (ii) the date on which the designated representative is required under paragraph (2) to submit an Acid Rain permit application. For the purpose of applying monitoring requirements under 40 CFR part 75, a unit that loses its exemption under 40 CFR 72.8 shall be treated as a new unit that commenced commercial operation on the first date on which the unit resumes operation.

|                          |
|--------------------------|
| Plant Name (from Step 1) |
|--------------------------|

**STEP 5**

Read the appropriate certification and sign and date.

**Certification (for designated representatives only)**

I am authorized to make this submission on behalf of the owners and operators of the affected source or affected units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

|           |      |
|-----------|------|
| Name      |      |
| Signature | Date |

**Certification (for certifying officials only)**

I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

|                    |               |
|--------------------|---------------|
| Name               | Title         |
| Company Owner Name |               |
| Phone              | Email Address |
| Signature          | Date          |

**Certification (for additional certifying officials, if applicable)**

I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

|                    |               |
|--------------------|---------------|
| Name               | Title         |
| Company Owner Name |               |
| Phone              | Email Address |
| Signature          | Date          |



## Acid Rain Program Instructions for Retired Unit Exemption Form (40 CFR 72.8)

*The Acid Rain regulations provide that an affected unit that is permanently retired is exempted from the requirements to obtain a Phase II acid rain permit, monitor emissions, and hold allowances. The designated representative or certifying official(s) of such a unit must submit the Retired Unit Exemption form. The provisions governing the retired unit exemption are found at 40 CFR 72.8.*

Please type or print. If assistance is needed, contact the North Dakota Department of Health, Division of Air Quality.

**STEP 1** Use the plant name and ORIS code listed on the Certificate of Representation (if any) for the affected source. An ORIS code is a 4 digit number assigned by the Energy Information Agency (EIA) at the U.S. Department of Energy to power plants owned by utilities. If the plant is not owned by a utility but has a 5 digit facility code (also assigned by EIA), use the facility code. If there is uncertainty regarding what the code number is, contact EIA at (202) 287-1730 (for ORIS codes), or (202) 287-1927 (for facility codes).

Identify the affected unit by providing the appropriate unit identification number. The identification number entered for the unit should be consistent with the Certificate of Representation for the affected source and with the unit identification number used in reporting to DOE and/or EIA.

**STEP 2** Indicate the date on which the unit was (or will be) permanently retired. This is the date on which: (1) the unit no longer emits SO<sub>2</sub> and NO<sub>x</sub>, and (2) when the owners and operators consider the unit to be permanently unavailable for the production of electricity.

**STEP 3** Enter the first full calendar year in which the unit is permanently retired. The exemption becomes effective January 1 of that year, but the unit may lose the exemption as provided in 40 CFR 72.8(d)(6).

**STEP 4** For a unit for which a designated representative has been authorized, the designated representative or alternate designated representative must read, sign, and date the certification at STEP 5 labeled "for designated representatives only" and submit this form.

If no designated representative has been authorized, a certifying official for each owner of the unit must read the certification at STEP 5 labeled "for certifying officials only," enter his or her name, title, name of the ownership company for which he or she is the certifying official, phone number, email address, and then sign and date. A certifying official is not required to submit a Certificate of Representation. If there is more than one owner of a unit for which no designated representative has been authorized, each owner of the unit must have a certifying official sign the appropriate certification at STEP 5.

**Submission Deadlines**

The form must be submitted by December 31 of the first year in which the unit is to be exempt.

**Submission Instructions**

Submit this form to the North Dakota Department of Health, Division of Air Quality, 1200 Missouri Avenue, Box 5520, Bismarck, North Dakota 58506-5520 **and** a copy to:

U.S. Environmental Protection Agency  
Clean Air Markets Division (6204J)  
Attn: Retired Unit Exemption  
1200 Pennsylvania Ave., NW  
Washington, DC 20460.

If you have questions regarding this form, contact your local, State, or EPA Regional Acid Rain contact, or call EPA's Acid Rain Hotline at (202) 343-9620 or the North Dakota Department of Health, Division of Air Quality at (701)328-5188.